CITY OF FRANKLIN

BUILDING PERMIT APPLICATION 9229 W. LOOMIS ROAD, FRANKLIN, WI 53132 Phone (414) 425-0084 Fax (414) 425-7513 (applications can be downloaded at www.franklinwi.gov)				Permit No.			
				Parcel No.			
Owner's Name				Phone			
Mailing Address City				Zip			
Email Address							
Contractors doing work on single or two f							
for the company and for the qualifier. Please include copies of both cards Contractor Name				Dwelling Contractor Cert#			
Dwelling Contr. Qualifier's Name (if work is on 1 or 2 family dwellings)				Dwelling Contractor Qualifier Cert#			
				-			
ailing Address City				Zip			
Email Address	Phone			Fax			
Applicant (if other than owner or contractor)				Phone			
Mailing Address	City			Zip			
Email Address	Phone			Fax			
Job/Building Address	Project/Business Name (if applicable		e (if applicable)	Unit or Suite No.			
Zoning District(s) Corner Lot/Dbl/Triple Frontag	je	Setbacks:	Front ft.	Rear ft.	Left ft.	Right ft.	
Project Type:	□ Indus	strial Institut	tional 🗆 Multi	Family - # of Uni	its		
PERMIT TYPE:							
□ New Construction		□ Hot Tub/Spa □ On Slab □ On Deck					
□ Addition	□ Fence – Type and Height						
□ Alteration	□ Pool □ Above Ground □ In (
□ Demolition		□ Deck □ Attached □ Detached □ Accessory Building □ On Congrete Slots □ On Wood Floor					
□ Repair	□ Accessory Building □ On Concrete Slab □ On Wood Floor □ Other						
□ Move	OtherSize of Reinforcement Beams						
·	الد	Size o	Remorceme	ent Beams			
□ Occupancy \$200 plus \$5 Technology Fee			- · · ·				
Cautionary Statement To Owners Obtaining Building P 101.65(Ir) of the Wisconsin Statutes requires municipalities building permit with a statement advising the owner that: It the contractor is not bonded or insured as required under smay be held liable for any bodily inquiry to or death of othe performed under the building permit or that is caused by an performed under the building permit. (b) The owner may rowner because of a violation by the contractor of the one-abecause of any bodily injury to or death of others or damage building permit or because of any bodily injury to or death of others or death of by the contractor that occurs in connection with the work performed.	Permits at that end of the own in the own in the at the of others erformed.	force the Uniformer hires a cont is 4 (2) (a), the following any damage to gence by the corolle to collect from family dwelling property of other or damage to the under the build	m Dwelling Cod ractor to perforn llowing consequenthe property of ntractor that occur m the contractor code or an ordiers that arises of the property of of ding permit.	e to provide an orm work under the sences might occupants that arise curs in connection damages for an inance enacted unut of the work pethers that is caus	wner who apply building perrur: (a) The constant of the work with the work y loss sustain nder sub. (1) rformed under sed by any ne	plies for a mit and owner work rk ned by the (a), er the egligence	
PPLICANT'S SIGNATUREDA				<u> </u>		·	
SEDARATE DEDMITS DECLIN							

Application No.

BLDG PERMIT APP 9/2010